## SHIPPER 20546 02-13-89 State of California—Health and Welfare Agency Serim Approved OMB No. 2050—0039 (Expires 9-30-91) Please print or type. (Form designed for use on elite (12-pitch typewriter)

See instructions on Back of Page 6 and Front of Page 7

Department of Health Services Toxic Substances Control Division Sacramento, California

	4	UNIFORM HAZARDOUS 1. Generator's US EPA ID N WASTE MANIFEST CIAIXIO1010101	Docume		2 Page 1 of 1	•	he shaded areas by Federal law.	
		3. Generator's Name and Mailing Address PARA PLATE			A. State Manifest Document Number 8 8 2 9 3 5 3 6			
		15919 SHOEMAKER., CERRITOS, CA 90702 .		Ì	8. State Generator's ID			
ပ္က		4. Generator's Phone (213 )404–3434  5. Transporter 1 Company Name 8	US EPA ID Number		C. Stato Transporter's 10 QCAPS 75			
2.75		l ' '	<b>,</b>					
1-800-852-7550	200	7. Transporter 2 Company Name 8 US EPA ID Number			E. State Transporter's ID F. Transporter's Phone			
1-80		9. Designated Facility Name and Site Address 10. US EPA ID Number		4-4-	G. State Facility's ID			
00 de		OMEGA RECOVERY SERVICES 12504 E. WHITTIER BLVD  CIAIDOI 4   Z   4   S   G   I   H. Facility's Phone						
တ က Man		WHITTHER, CA 90602 ICIAIL	0 0 4 2 2 4 5 0					
£ 10		11 US DOT Description (Including Proper Shipping Name, Hazard Class, a		No No		antity Unit WirVol	Waste No.	
<b>රට</b> ට	G	WASTE ORM-A N.O.S NA 1693						
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02; 7	R	b. '					State	
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0-42	Ř	C.				<u> </u>	State	
TER 1-80		·		1 1	1 1 1		EPA/Other	
		d.		1 1			State	
GEN				- Inches			EPA/Other	
THE NATIONAL RESPONSE CENTER 1-800-424-8802;		J. Additional Descriptions for Materials Listed Above				des for Wastes L	isted Above	
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IANC							8	
VATI		15. Special Handling Instructions and Additional Information						
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SPILL, CALL		GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and						
		national government regulations.  If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the						
.∀ G		to be economically practicable and that I have selected the practicable present and future threat to human health and the environment; QR, it generation and select the best waste management method that is ave	I am a small quantity gener	eator, I he	ive made a good	faith effort to mi	nimize dry waste	
NI NI		Printed Typed Name	Signature		The second secon		Month Day Year	
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CASE OF AN EMERGENCY	R	17. Transporter 1 Acknowledgement of Receipt of Materials  Printed/Typed Name	Signature	75	,**		Month Day Year	
	A N S	Robert To Bus Env	A CONTRACTOR OF THE PARTY OF TH	Laga	مارس مدومه میساید	<b>.</b>	1/121/151819	
	30 p O C	18. Transporter 2 Acknowledgement of Receipt of Materials		4				
- 1	Ė	Printed/Typed Name	Signature				Month Day Year	
Z.	- <u>ā</u> -	19. Discrepancy Indication Space						
	FA							
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		20. Facility Owner or Operator Certification of receipt or hazardous mater	ials covered by this manifes	st except	as tiòted in Herr	19.		
	Y	Printed/Typed Name	Signature	7		7	Month Day Year	
		FRANK FORD					100115191	